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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT		ATTORNEY DOCKET NO.	
10/579,070	05/11/2006	05/11/2006 Hoon Han			36470-231114	3303
TITLE OF INVENTION: METHOD OF ISOLATING AND CULTURING MESENCHYMAL STEM CELL DERIVED FROM CRYOPRESERVED UMBILICAL CORD BLOOD						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	yes	\$755.00	\$300.00		\$1,055.00	03/10/2010
EXAMI	EXAMINER		CLASS-S	SUBCLASS		
F. G. Sajjadi				378000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent 1 Venable LLP						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member 2 Keith G. Haddaway, Ph.D.						
a registered attorney or agent) and the names of						
form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Use Address Indication for Fee Address Indication form PTO/SB/47; Rev 03-02 or more recent) attached. up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed						
for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Hoon Han Gyeonggi-do, Korea						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
X Issue Fee A check in the amou				ount of the fee(s) is enclosed.	
X Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.						
Advance Order -# of Copies X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0261						
5. Change in Entity Stat	us (from status indicate	ed above)				
a. Applicant claim	s SMALL ENTITY sta	atus. See 37 CFR 1.27.	b. Applic	eant is no longe	r claiming SMALL ENTITY s	tatus. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and Pu	ablication Fee (if require	ed) will not be accepted from a			viously paid issue fee to the appl nt; a registered attorney or agen	lication identified above. t; or the assignee or other party in
interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature /Keith G. Haddaway/					Date N	March 8, 2010
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Typed or printed name	ed or printed name Keith G. Haddaway, Ph.D.				Registration No.	46,180